

Under the Paperwork Reduction Act of 1996, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Application Number</td> <td>10/552,851</td> </tr> <tr> <td>Filing Date</td> <td>July 21, 2006</td> </tr> <tr> <td>First Named Inventor</td> <td>AIME, Silvio</td> </tr> <tr> <td>Title</td> <td>ADDUCTS BETWEEN MAGNETIC RESONANCE SHIFT REAGENTS AND SUBSTRATES CONTAINING EXCHANGEABLE PROTONS FOR "CEST" APPLICATIONS</td> </tr> <tr> <td>Art Unit</td> <td>1618</td> </tr> <tr> <td>Examiner Name</td> <td>RIDER, LANCE W</td> </tr> <tr> <td>Attorney Docket Number</td> <td>P-75080-US</td> </tr> </table>	Application Number	10/552,851	Filing Date	July 21, 2006	First Named Inventor	AIME, Silvio	Title	ADDUCTS BETWEEN MAGNETIC RESONANCE SHIFT REAGENTS AND SUBSTRATES CONTAINING EXCHANGEABLE PROTONS FOR "CEST" APPLICATIONS	Art Unit	1618	Examiner Name	RIDER, LANCE W	Attorney Docket Number	P-75080-US
Application Number	10/552,851														
Filing Date	July 21, 2006														
First Named Inventor	AIME, Silvio														
Title	ADDUCTS BETWEEN MAGNETIC RESONANCE SHIFT REAGENTS AND SUBSTRATES CONTAINING EXCHANGEABLE PROTONS FOR "CEST" APPLICATIONS														
Art Unit	1618														
Examiner Name	RIDER, LANCE W														
Attorney Docket Number	P-75080-US														
I hereby revoke all previous powers of attorney given in the above-identified application.															
<input type="checkbox"/> A Power of Attorney is submitted herewith. OR <input checked="" type="checkbox"/> I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: <div style="float: right; border: 1px solid black; padding: 2px; margin-top: -20px;">49443</div> OR <input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 50%;">Practitioner(s) Name</th> <th style="width: 50%;">Registration Number</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>		Practitioner(s) Name	Registration Number												
Practitioner(s) Name	Registration Number														
Please recognize or change the correspondence address for the above-identified application to:															
<input type="checkbox"/> The address associated with the above-mentioned Customer Number. OR <input checked="" type="checkbox"/> The address associated with Customer Number: <div style="float: right; border: 1px solid black; padding: 2px; margin-top: -20px;">49443</div> OR <input checked="" type="checkbox"/> Firm or Individual Name: Pearl Cohen Zedek Latzer, LLP															
Address	1500 Broadway, 12th Floor														
City	New York State NY ZIP 10036														
Country	USA														
Telephone	(646) 878-0800 Email USPTO@pczlaw.com														
I am the:															
<input type="checkbox"/> Applicant/Inventor. OR <input checked="" type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on															
SIGNATURE of Applicant or Assignee of Record															
Signature	<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px;">Date 4/09/2011</div> </div>														
Name	DIANA BRACCO Telephone														
Title and Company	Bracco Imaging S.p.A.														
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.															
<input checked="" type="checkbox"/> * Total of 1 forms are submitted.															

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.